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Committee on the Rights of the Child

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List of Abbreviations

CC	Civil Code
CCCD	Coordinating Commission Against Drugs
CEI	Child Emergency Centre
CNDHC	National Commission for Human Rights and Citizenship
PC	Penal Code
CPC	Civil Procedure Code
CNPETI	National Committee for the Elimination of Child Labour
PPC	Criminal Procedure Code
CRC	Civil Registration Code
CRCV	Constitution of the Republic of Cabo Verde
CSMJ	Superior Council of the Judiciary
CSMP	Superior Council of the Public Prosecution Services
DGSPRS	General Directorate of Prison and Social Reintegration Services
ECA	Child and Adolescent Statute
EIO	Information and Guidance Office
FCDCA	Cabo Verdean Forum for the Rights of Children and Adolescents
ICCA	Cabo Verdean Institute for the Child and Adolescent
ICIEG	Cabo Verdean Institute for Gender Equality and Equity
IDSR	Demographic and Reproductive Health Survey
INPS	National Institute for Social Security
INE	National Institute for Statistics
GBV	Gender-Based Violence
MDGs	Millennium Development Goals
PANPETI	National Action Plan for the Prevention and Eradication of Child Labour
JP	Judicial Police
NP	National Police
SCJ	Supreme Court of Justice
CC	Constitutional Court
SRH	Sexual and Reproductive Health
GBV	Gender-Based Violence

Introduction

1. Cabo Verde ratified the Convention on the Rights of the Child in 1991, which entered into force in the national legal system through Law No. 29/IV/91 of 30 December. In 1999, the State of Cabo Verde presented the Initial Report to the Committee on the Rights of the Child (CRC/C/11/Add.23), which was considered and adopted by the Committee in October 2001. The Committee's concluding observations were received in November 2001 (CRC/C/15/Add.168) and since then a number of reforms have been undertaken to respond to the recommendations made to the State of Cabo Verde.

2. The education system reform was put in motion, legislation was strengthened by increasing some criminal sanctions on sexual abuse and violence against children and adolescents, improvements were made in childcare policies and other social policies, in line with the recommendations made to the State by the Committee, The Statute of the Child and Adolescent (ECA, Law no. 50/VIII/2013, of BO I Series, no. 70, of December 26), was approved by the National Assembly, as a regulating instrument on Children and Adolescents, which adopts the best interest of the child as a cross-cutting axis and a fundamental principle.

3. The present periodic report is a combined report II, III and IV and is composed of two parts: a separate common core document and the present specific document to the CRC, prepared based on the revised guidelines (CRC/C/58 /Rev.3). It shall provide the Committee with information on the implementation of the Convention from 2002 to 2016. The baseline is essentially the 2010 Census, as well as data from surveys conducted by the National Institute of Statistics, sectoral studies and statistics, where available. Whenever possible the data are presented in a disaggregated manner according to the Committee's recommendations (by gender, age, urban or rural areas, among others).

4. The drafting of the report was coordinated by the National Commission for Human Rights and Citizenship (CNDHC), pursuant to Article 6 (4) (b) of its Statutes, approved by DL n° 38/2004, of October 11, which tasks it, within the scope of its responsibility to link international law with domestic human rights law and international humanitarian law, with the duty to coordinate the preparation of reports to be submitted by the Government to United Nations bodies and committees and regional institutions on the implementation of international and regional instruments on human rights and international humanitarian law.

5. A joint task force was established with the Cabo Verdean Institute for Children and Adolescents and in the process the sectors were involved, which provided data for the preparation of the report. The first draft of the report, which was finalized in late 2013, was publicly socialized on 18 December 2013, in the United Nations meeting room with public sector and civil society partners to make the document known and to collect participants' contributions. This first draft of the report has not, however, been submitted and, by the end of 2016, there was a need to update the data contained in the report in light of the new progress achieved in the period covering 2013 to 2016. The updating process has also been conducted in close partnership with ICCA, sectors and civil society organizations, which are partners on the rights of the child. The preliminary version of the updated report was shared with all sectors and civil society that contributed to its elaboration, including the CNDHC's commissioners, with whom a joint working session was held on February 20, 2017. The contributions received were absorbed in the present final version.

I. General measures of implementation

Reservations to the ratified Convention or Optional Protocols

6. Cabo Verde ratified the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Prostitution and Child Pornography (Resolution 39/VI/02 of April 29), Protocol Optional to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict (Resolution No. 40/VI/02, of 29 April). Cabo Verde has ratified both the Convention on the Rights of the Child and the optional protocols referred to without reservation.

7. In addition, and regarding international instruments related to the rights of the child, Cabo Verde ratified the African Charter on the Rights and Welfare of the Child (Resolution 32/VI/93 of 19 July), the Declaration on the Millennium Development Goals (2000), the Convention on the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour (Decree 5/2001, of 30 July), the Recommendations of the 6th World Conference on the Promotion of Health (2005), the resolutions of the Conference of Ministers of Health of the African Union (2007), and African Youth Charter of the African Union (February 2010). Cabo Verde also ratified ILO Conventions 138, 182 on the Minimum Age for Child Labour and on the Worst Forms of Labour, as well as The Hague Convention on International Adoptions. With regard to Gender Equality, Cabo Verde ratified the Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women.

Legal Framework

8. Following the recommendations of the Committee on harmonizing national legislation with CRC, in 2005 the Government of Cabo Verde initiated the process of legal and institutional reform in the field of childhood and adolescence. To that end, an intersectoral commission for the elaboration of the Statute of the Child and Adolescent was created, through the Cabinet Resolution no. 05/2005, of 28 February.

9. The Child and Adolescent Statute (ECA) — was approved by Law no. 50/VIII/2013, of BO I Series, no. 70, of December 26. The ECA has updated a number of substantive and procedural laws for compliance with the CRC and the recommendations made to Cabo Verde in this regard. The ECA came to unify the measures that existed separately, and to determine the repeal and regulation of some laws. The civil protection measures were totally repealed, being regulated by the ECA, closing the cycle of a profound reform of the sector, which aims to protect, guarantee, promote and restore the inherent rights of children and adolescents, providing them with conditions for integral development and the construction of its full personal and citizen autonomy, in accordance with the Constitution, the international treaties to which Cabo Verde is a party, and the other laws of the Republic.

10. The ECA is guided by the principle of the best interest of the child and the adolescent, legal value and criterion of measurement of the decisions related to that segment of our society. It deals first with the fundamental rights, freedoms and guarantees of children and adolescents, specifically addressing the rights to life, personal integrity, freedom, identity, health, education, as well as rights of assembly, manifestation and participation, the right to live in the family and the opportunity to have an appropriate standard of living.

11. At the same time, it establishes a mixed system for the protection of the fundamental rights of children and adolescents. This includes defining the role of judicial institutions (Prosecution Services and Courts), the Cabo Verdean Institute for Children and Adolescents (ICCA), the National Commission for Human Rights and Citizenship, the Municipal Committees for the Protection of the Rights of Children and Adolescents, the Cabo Verdean Forum for the Rights of Children and Adolescents (FCDCA), the Children and Youth Parliament (IJP), in addition to the relevant role to be played by non-governmental organizations (NGOs) and community-based organizations (CBOs). It is, therefore, a mixed system of protection where, on one hand, the judicial institutions and, on the other hand, the social, public and private institutions intervene, along with the relevant role entrusted to the family and society as a whole.

12. The ECA also regulates procedures for the restitution of the rights of children and adolescents, such as the restitution of all rights violated by restitution action, including against public institutions, public bodies or civil servants and the enforcement of civil and criminal liability of offenders. The Statute also gives special attention to the restitution of the right to family life, regulating a procedure for this purpose, providing for its modalities, hearing not only the parents but also the child or adolescent himself/herself, stipulating, on the other hand, the reserved nature of the proceeding and imposing restrictions on the media, in order to preserve the identity of the concerned ones. Under the cases of restitution of the right to family life, the ECA also regulates the process of family reception, given its particularities, defining its assumptions, the requirements and obligations of the foster

families, the reception in institution and its rules, the supervision and the penalties that may apply to them. The civil guardianship proceedings, notably those related to maintenance due to children and adolescents, as well as the regulation or inhibition of the exercise of parental authority, are also appropriate to the new social reality and expressed in the ECA, thus expressly repealing the Decree nº 17/83 as of April 2.

13. In addition to other sanctions arising from general principles of law, the ECA establishes specific misdemeanours applicable to all those who violate or threaten to violate the rights of children and adolescents. It is, therefore, a legislative measure that responds to current needs, which aim to raise the levels of protection of the rights of children and adolescents in Cabo Verde.

14. It should be mentioned that the ECA is a legal instrument, still pending regulation, but nevertheless steps have already been taken to move forward with the draft regulation. To this end, a working team has been set up, which includes Judges from the Prosecution Services, the Judiciary, UNICEF, CNDHC and ICCA, who are responsible for preparing the draft regulation. The draft regulation is expected to be formally submitted shortly, with its approval being a priority for 2017.

15. Regarding the measures taken to combat and prevent child labour, it is worth mentioning the progress made in terms of the legal framework, including the entry into force of a List of Dangerous Work prohibited to children and adolescents, approved by Law no. 113/VIII/2016 of the Official Gazette no 15, I serie, of 10 March 2016.

16. The National Action Plan for the Prevention and Eradication of Child Labour (PANPETI) was prepared and approved by the Council of Ministers through resolution 43/2014 of the BO, I serie, no. 35 of June 2. The National Committee for the Prevention and Combat against Child Labour (2013) — PETI was created and approved by the Council of Ministers, promoted under the IPEC/ILO "Prevention and Elimination of Child Labour in West African Countries" project. The CNPETI is composed of 30 institutions, in a four-part composition (Government, representation of workers, employers and civil society).

17. In relation to the measures taken to guarantee basic schooling, the Basic Law of the Education System of 1990 (Law no. 103/III/90 of 29 December) was revised by Law 113/V/99, of October 18 and more recently by Legislative Decree No. 2/2010 of 7 May, which extends compulsory education to 8 years.

18. In terms of the legal framework, with regard to children in conflict with the Law, in 2006 the new guardianship regime was approved for children aged between 12 and 16 years and who are agents of some fact qualified by law as a crime, for Legislative Decree No. 2/2006 of 27 November, which entered into force in February 2007.

19. Regarding sexual crimes against children, the Legislative Decree No. 4/2015 of 11 November (with amendments to Decree-Legislative nº 4/2003) was approved in 2015, which entered into force on 12 December 2015. The approved amendments maintained the criminal types related to sexual offences, adding three new types, specifically: Article 145 A — Recourse to prostitution by children; Article 147 A — Indecent exposure and 152 A — Consented artificial procreation.

20. In addition, it has aggravated most of the penalties under sexual crimes. The types of criminal offences provided for in the Penal Code of 2003 (Legislative Decree 4/2003) and the amendments made with Legislative Decree No. 4/2015 regarding sexual crimes against children are, as follows: Article 142 Sexual assault; Article 143 Sexual assault with penetration; Article 144 Child sexual abuse; Article 145 Sexual abuse of children aged between 14 and 16 years (increased to 14 and 18 with amendments; Article 145 A — Recourse to prostitution of children (introduced with amendments); Article 148 Pimping, Article 149 Enticement of a children to practice a sexual act abroad, Article 150 Exploitation of children for pornographic purposes, Article 152 Sexual harassment.

21. In addition, and aiming at countering sexual crimes against children, the Council of Ministers approved the 2017–2019 National Plan to Combat Sexual Violence Against Children and Adolescents, in November 2016, published in Official Gazette No. 72 Ia Series of December 28, 2016, — a plan that follows the two previous plans to combat sexual violence, from 2005 and 2010, respectively. In 2014, the Pro-Child Committee,

which is the National Committee to Combat Sexual Abuse and Exploitation of Children and Adolescents, was approved by a Council of Ministers' resolution. It operates under the direct supervision of the member of the Government responsible for the area of childhood and adolescence. It is a body in charge of advising, articulating and coordinating the activities from public and private organizations and services with intervention in the area of childhood and adolescence.

22. Other relevant changes in Cabo Verde's legal framework may include the legal framework for the prevention of violence against women, as well as measures of protection and punishment, which were substantially strengthened with the approval of Law 84/VII/11 of January 10 (GBV Law), under which gender-based violence became a public crime *(ex-officio)*.

23. Regarding the integration of people with disabilities, in 2000, the Law establishing the General Bases for the Prevention, Rehabilitation and Integration of Persons with Disabilities (Law 122/V/2000, of June 12, 2000, I Series — No. 17 reformed by the Basic Law 40/VIII/2013): outlined a clear and comprehensive national mandate for the elimination of discrimination against persons with disabilities, with a view to their social integration and participation in the country's social and economic development. In 2009, the Decree-Law 62/2009 of December 14 — Organic Law of the Ministry of Labour, Family and Social Solidarity, defines the institutional framework for the matters related to persons with disabilities, and establishes the National Council for the Rights of Persons with Disabilities, and the adoption of a Strategic Plan for Vocational Training — to promote opportunities for access, attendance and success in vocational training courses for people with disabilities. It is worth mentioning that Article 76 of the Constitution recognizes the right of persons with disabilities to special protection from family, society and public authorities, giving them full responsibility for the prevention, treatment, rehabilitation and full social inclusion of persons with disabilities.

Coordination and application of the Convention

24. The Cabo Verdean Children Institute — ICM was renamed the Cabo Verdean Institute for Children and Adolescents — ICCA in 2006, which was an important step in consolidating the policy of comprehensive protection of the rights of children and adolescents, with ICCA as the organization mandated to promote the social policy for the protection of the rights of children and adolescents.

25. ICCA's major competencies are as follows: (i) contribute to the development of a policy to meet the rights of children and adolescents; (ii) enact protection, assistance and education measures for children at risk; (iii) plan, supervise, coordinate and implement activities and projects for the protection of children and adolescents at risk; (iv) promote prevention actions aimed at sensitizing and mobilizing the community for the problem of children and adolescents and defending their interests; (v) supervise the institutions of care for children and adolescents; (vi) coordinate and promote the development of national and international cooperation in the field of protection of the Rights of Children and Adolescents; (vii) promote studies at the national level on the situation of children and adolescents.

26. In national coverage approach, and in line with the Committee's recommendations, ICCA is based in Praia (capital of the country, on the island of Santiago), with 5 delegations in the islands of São Vicente, Sal, Fogo and Santo Antão and in the Municipality of Santa Catarina de Santiago. In addition, it has 17 Municipal Committees for the Protection of the Rights of Children and Adolescents, and focal points where there is no representation.

27. ICCA maintains intersectoral partnerships with the Ministry of Education and Sports, the Municipalities, the Ministry of Health, through the Health Delegations, the National Police and Judicial Police, the Courts, the Attorney General's Office and Civil Society Organizations and private entities.

Data

28. The main data sources are the 2000 and 2010 Census as well as data produced through surveys, studies, annuals, reports and statistics produced by governmental and non-governmental institutions. Whenever possible, the data are presented in a disaggregated manner as recommended by the committee.

29. It should be noted that ECA's Article 73 (2 and 3) includes a Child and Adolescent Observatory, to be created within the CNDHC, to be implemented under ECA's the regulation process. At the same time, the CNDHC is in charge (Article 73 (1)) of monitoring the implementation of public policies in the field of children and adolescents.

Supervision of the Application of the Convention

30. In response to the Committee's recommendations for an effective and independent mechanism to monitor the implementation of the Convention, which was also recommended to the State of Cabo Verde by other Committees responsible for follow-up on other conventions ratified by Cabo Verde, it was established the National Commission for Human Rights and Citizenship (CNDHC), in 2004, through Decree-Law No. 38/2004 of 11 October. The Common Core Report sets out in detail its mandates, organization and intervention (paragraphs 182 to 189).

Resource allocation

31. The current budgets of both the Cabo Verdean Institute for Child and Adolescent (ICCA) and the National Commission for Human Rights and Citizenship (CNDHC) are secured by the State Budget through fund transfer. The transfer of resources for policies and provision of services to children and adolescents has also a cross-cutting nature, from on sectoral education and health policies, among others.

32. In addition, the Government maintains a privileged cooperation framework with several international organizations, namely, the United Nations Funds and Programs in Cabo Verde: UNICEF, ILO, UNODC (juvenile justice), WHO and UNFPA (Health), UN Women (gender), among others. Several bilateral cooperation entities are also technical and financial partners of Cabo Verde in the field of childcare (from Spain, Luxembourg, Portugal, among others). Cabo Verde also received support from *Handicap International* and *Bornfonden*, among other international organizations.

Cooperation with civil society organisations

33. The cooperation with non-governmental organizations working in thematic areas relating to the implementation of the Convention is strong. Currently, NGOs are the main partners at the decentralized and local level concerning awareness-raising, dialogue, advocacy and reporting of situations that weaken the rights of children and adolescents, by cooperating with ICCA in the implementation of the various intervention programs. The protection network in Cabo Verde has initiatives from several non-governmental organizations, which implement programs jointly with ICCA. Most of these organizations focus their services on open social-care support. While not being able to refer to all of them, it is noteworthy those who provide support at national level: ACRIDES, Acarinhar, Happy Childhood Foundation, Cáritas de Cabo Verde, A Ponte Association, Zé Moniz Association, Irmãos Unidos Juvenile Centre, Association of Deaf and Hear Impaired Children, Chã Matias Association, National Network for the Campaign Education for all, among others.

34. The Aldeia SOS NGO, which provides shelter services, has two SOS Children's Villages (Santiago Island) dedicated to family type, long term hosting of orphaned or abandoned children; 1 Shelter for Children in Emergency Situations — intended for the hosting of children in emergency situations for a short period; 8 Community Intervention Centers within the Family Enhancement Program (5 in Santiago and 3 in São Vicente), which are mainly aimed at preventing child abandonment through family strengthening and community development; 2 Kindergartens (Santiago) 1 Social Centre in the city of Mindelo (island of São Vicente) designed to work with street children and their families.

35. The coordination with partners, including civil society, is conducted through existing mechanisms, notably, through the National Committee for the Prevention and Eradication of Child Labour (CNPETI), as well as the Pro Child Committee for Child and Adolescent Prevention and Control against Sexual Abuse and Exploitation, which include members of NGOs, public and private institutions, and religious denominations. ICCA keeps close articulation with NGOs operating in the field of child care, especially at the situation analysis stage, as well as in the planning process, when a participatory process is developed around specific issues such as sexual abuse, neglect and maltreatment, restorative justice, and child labour. It is expected that in implementing the 2017–2019 National Plan to Combat Sexual Violence Against Children and Adolescents, the NGOs will be implementing partners, as well as in the process of reviewing the joint action.

36. In addition, and as far as it concerns the necessary articulation with civil society organizations, they were involved in the preparation of the ECA, in the joint preparation of documents and in the mainstreaming of the recommendations received from the CRC Committee.

37. In the field of the protection of the rights of children with disabilities, civil society organizations have become key stakeholders with a direct and strong impact on the inclusion of children with disabilities and they are direct partners of the Ministry of Education, having played a relevant and complementary role to that of the Ministry of Education.

Dissemination of the Convention

38. In line with the Committee's recommendations regarding the dissemination of the Convention, both ICCA and the National Commission for Human Rights and Citizenship (CNDHC) and civil society organizations have played an important role in publicizing not only the Convention but also other international human rights instruments related to the protection and promotion of the rights of the child. Among the various activities for the dissemination of the CRC stands out: the development and distribution of guides, posters, booklets, leaflets and pamphlets on the rights of children; discussion meetings with families in the community; promotion of training activities for ICCA's and other partner entities' staff; development of programs in consultation with partners; evaluation and reporting; dissemination of activities and awareness-raising in the media (requesting a broadcasting space for dissemination of activities, conducting a program on community radio stations); creation/promotion of own spaces for the dissemination of activities, awareness-raising and discussions; monthly meeting with parents group to approach different topics; conducting lectures, forums and workshops alluding to the problem of child care; presentation of educational guides in schools; and commemoration of important dates such as International Children's Day, International Day of the Innocent Child Victim of Aggression, Week against Child Labour, and African Children's Day.

39. The activities implemented focus on the CRC and the ECA provisions relating to the prevention, early detection, reporting, and intervention in cases of child neglect and abuse; intervention and prevention in sexual abuse cases; prevention and intervention in case of child trafficking; the application of the ECA at national and sectoral level and also regarding parental care, corporal punishment, respect for the child's opinion, among other actions that are developed by ICCA in order to strengthen the rights of children and adolescents at the national level.

40. At the educational level, as detailed in the Common Core Document (paragraph 196), Education for Citizenship has been integrated into the school curricula.

41. In relation to the strengthening of institutional capacity, in 2010 the National Police (PN) carried out a workshop with decision-makers, followed by the formulation and implementation of a PN's capacity building project: in 2010, an internal pool of trainers received training on Human Rights, Gender and GBV (a 2-month training of trainers), which in 2011 multiplied the training to more than 370 police officers. Following this activity, the Ministry of Interior approved in 2014 the introduction of a Module on Human Rights and Citizenship in the curricula of the National Police Training Centre, as well as a module on Gender and GBV.

42. A good practice of collaboration between sectors can be observed during the process of preparation for the dissemination of the ECA and its implementation: this collaboration consisted of the mobilization of magistrates at national level, which facilitated the training of social workers from various sectors and of civil society on ECA, preparing them for the dissemination and implementation of the ECA.

Studies, Projects and International Cooperation

43. ICCA has developed a number of studies in the child care sector, which have been an added-value in monitoring and evaluating the implementation of interventions to promote and protect children's rights and to inform the planning processes in the sector. In particular: 3 Studies on Sexual Abuse and Exploitation (2005, 2010, 2015), 2 Studies on Child Labour — quantitative and qualitative (2007, 2013–2014), Study on street children (2005); Study on the vulnerability of children in Cabo Verde (2009); Study on the functioning of the Child and Youth Parliament and definition of Other Forms of Participation (2008); Study-Diagnosis on the situation of Social Workers and Human Resources Training Program (2008); Study/Diagnosis on the Strengthening of the Capacity System of Child Care and Hosting Centres in Cabo Verde (2013–2014); Mapping and Evaluation of the Protection System for Children and Adolescents of Cabo Verde (2013–2014).

II. Definition of the child

44. Cabo Verdean legislation establishes adult age as 18 years old. The ECA defines that a child is considered whoever has not yet reached the age of 12, and an adolescent, whoever is between 12 and 18 years old (Article 4 (a) and (b) of Law 49/VIII/2013 of December 26).

45. In 2015, according to the 2010–2030 Demographic Projections prepared by the National Institute of Statistics, the population of children and adolescents represented 35% of Cabo Verde's population: out of a total of 524,833 inhabitants, 184,444 are under 18 years old. Children represent 23.5% of the population (123,143 children aged 0–11 years) and adolescents 11.7% (61,301 adolescents aged 12–17 years). The children and adolescents in Cabo Verde are 49.6% girls and 50.4% boys.

46. Taking into account the increase in the number of years of compulsory education, from 6 to 8 years of schooling, the age covered by this level of education increased from 6 years to 15 years (or more when the child repeated some of mandatory schooling years). As a result, the Basic Law of the Education System of 1990 (Law no. 103/III/90 of 29 December) was revised by Law 113/V/99, of October 18 and more recently by Legislative Decree No. 2/2010 of 7 May, which extends compulsory education to 8 years.

47. Regarding the minimum age for admission to work, the ECA (Section XI — Right to Work Protection — Article 61) establishes that the minimum age for adolescent's paid work shall be fifteen years. The State may set other minimum ages, above fifteen years, for other work of a dangerous nature or that are classified as the worst forms of child labour, especially those that may interfere with their education or that are harmful to their health or physical, mental, moral and social development. The Constitution of the Republic of Cabo Verde under article 74 stipulates that children have the right to protection of the family, society and public authorities in order to allow for their integral development and expressly prohibits the exploitation of child labour. The under-constitutional legislation, more specifically the Labour Code, stipulates that no child may work before completing compulsory school age and in any case before the age of 15 and that employers must verify that children are physically able to perform the tasks and submit them to a health exam on annual basis.

III. General Principles

Non-discrimination

48. The national legal provisions ensure equality and non-discrimination before the law. The principle of non-discrimination is enshrined in Article 5 of the ECA — Equal opportunities and non-discrimination. All children and adolescents are equal, and cannot be discriminated against based on any condition, that of their parents, representatives, guardians or relatives.

49. Regarding non-discrimination on grounds of sex, the Special Law on Gender-Based Violence (Law 84/VII/11, of January 10) and its regulatory framework (Decree-Law no. 8/2015) reinforced the responsibilities of several sectors in promoting gender equality and non-discrimination, in particular the education system, from pre-school to higher education, including vocational training. Within the framework of implementing the law, training and awareness raising activities were held aiming at strengthening the capacities of primary education managers and teachers on education for gender equality in a context of classroom and intervention in the school and educational community, prioritizing the islands with higher VBG rates (Santiago, Fogo and Sal).

50. Also, civil society engaged in gender equality has been working to prevent this type of discrimination, based on sex in a number of initiatives. Of particular note are the initiatives aimed at the engagement of men and boys: The White Ribbon Network of Cabo Verde has been working in its social mobilization, including through training, giving participants the opportunity to analyse and deconstruct the way they conceive masculinity/femininity, through the analysis of stereotypes, in particular on paternity. One of the main target groups for this association's interventions are adolescents, including in school and community settings. The Cabo Verdean Institute for Gender Equality and Equity (ICIEG) supported the experience exchange programmes with networks from other countries, the development of information, education and communication materials, pedagogical and gender training, as well as the creation of a theatre group (Theatre of the Oppressed).

51. In relation to the recommendation to eliminate any discrimination based on disability, the ECA brings together in its Section X (Articles 54 to 59) the legal provisions on the rights of children and adolescents with disabilities.

52. With regard to foreign children, they enjoy the same social protection as nationals in accordance with the Law.

Best interest of the child

53. The ECA, Law no. 50/VIII/2013, NG I Series, no. 70, of December 26, adopts as a cross-cutting axis the principle of best interest of the child and adolescent, legal value and criterion of decision measurement relating to children under 18 years old in Cabo Verde. It reinforces its nature as a fundamental principle, as a right, as a general principle and as a rule of procedure.

The right to life, survival and development

54. The Right to Life and Personal Integrity is a principle enshrined in the ECA in Section II, Articles 16 Right to Life and 17 Right to the protection of Personal Integrity.

55. Life expectancy data have already been reported in the Common Core Document (paragraph 22). The under-5 mortality rate decreased by 59.8% between 1990 and 2014, from 56 to 22.5 per thousand live births in 2014. The infant mortality rate (under 1 year of age) decreased by 51.6% between 1990 and 2014, from 42 to 20.3 per thousand live births in 2014. In 2014, the lowest absolute value ever occurred in terms of infant deaths (less than 1 year of age), covering the 1990–2014 period.

56. In relation to the suicide rate in the 10–14 age group, 5 suicide deaths occurred between 2005 and 2014 (1 in 2006, 1 in 2010 and 3 in 2011). In the 15–19 age group, 10

suicide deaths occurred in the same period from 2005 to 2014 (4 in 2005, 1 in 2011, 2012 and 2013 respectively, and 3 in 2014).

Respect for the views of the child

57. Article 19 (1, 2 and 3) of the ECA embodies the principle of the right to freedom of expression and opinion. In line with the recommendations of the Committee, 32 (a) and (b), with the aim of fostering participation, stimulating the right to participation and freedom of expression, the Child and Youth Parliament was created in June 1999, which in each session brings together children from all the national territory for discussion and presentation of recommendations on matters of public interest and related to child care. Six editions of the Child and Youth Parliament were held. The conclusions/demands from the Child and Youth Parliament were always forwarded to the Government. In addition, the Presidents of the Parliament have had a 2-year mandate, participating in the local processes of their municipalities of residence (Municipal Assemblies) as well as in ICCA activities, including at the highest level.

58. The theme of freedom of expression and children's opinion is addressed in the awareness raising activities promoted by ICCA, in the education sector and its partners in civil society, targeting children and other stakeholders in the educational community (parents, teachers, community). It is also part of ICCA's "Family School" program, which has been involved in the field of parental education and has been working since 2013 in partnership with ICCA's network of partner institutions and NGO.

IV. Civil rights and freedoms

59. The table below shows how the ECA provisions are aligned and respond to children's civil rights and freedoms.

CRC	*ECA*
Name and nationality (Article 7)	Article 28 — point 1) Right to identity and 2) Nationality
Preservation of identity (Article 8)	Article 28 — point 8 Right to identity
Freedom of expression (Article 13)	Article 19 — Freedom of expression
Freedom of thought, conscience and religion (Article 14)	Article 20 — Freedom of thought, conscience and religion
Freedom of association and peaceful assembly (Article 15)	Article 24 — Right to association
Protection of privacy (Article 16)	Article 17 — Protection of personal integrity
Appropriate access to information (Article 17)	Article 53 Right to information
The right not to be subjected to torture or other cruel, inhuman or degrading or treatment punishment, including corporal punishment (article 37a)	Article 31 — Family Protection Article 39 — Surveillance and Protection

Name and nationality

60. Regarding recommendation 34 of the Committee, in February 2010, the Ministry of Justice (MJ), in partnership with Notaries and Identification Registries (RNI) and the Ministry of Health, developed the "Registration at birth" project, which allows registration at birth in health facilities. It was implemented on an experimental basis at the Agostinho

Neto Hospital, in the city of Praia (Santiago Island) and later extended to Santiago Norte Regional Hospital (Santiago Island), Ribeira Grande Regional Hospital and Paúl Health Centre (Santo Antão Island), the Hospital Baptista de Sousa (island of São Vicente) and the health facilities of Fogo Island. The project has created modern and effective mechanisms for registration at birth, based on online registration with the support of health professionals, and free issuance of the first birth certificate at the time of registration. The Registration at Birth Project was promoted through a national campaign: in March 2010, it was launched by the Ministry of Justice, in partnership with the ICCA, the Happy Childhood Foundation and the CNDHC and ran under the motto *Rejistu di Nascimentu, first Direction di nôs Fidju* (Birth Registration, our children's first right). The population's participation in the initiative was promoted through a media campaign, including TV and radio spot, among other campaign components.

61. In terms of results, there was a change from a situation in which 80% of children under 5 years of age had not yet been registered to 8% of children from 0 to 6 years old who were not yet registered, according to the 2013 Continuous Multi-Purpose Survey on family practices. Unregistered children are mostly children under one year of age, indicating late registration practices: about 28.4% of children under one year are unregistered, with only 1.4% of children aged between 5 to 6 years. There is a difference of about 3.5 percentage points between rural and urban areas: 6.7% of children aged between 0 to 6 years in urban areas do not yet have a record, which is the case with 10.3% of the rural population. There was a difference of 2 percentage points between the registration of boys (7.1%) and girls (9.1%). Regarding reasons for not registering, about one third of the cases (32.7%) are associated with legal documentation issues (e.g. lack of documentation of parents, foreign parents, mother still legally married to another man). This reason is more frequent in urban areas (41.7%). It follows that parents did not see interest in the registry (24.6%), a more frequent reason in rural areas (34.6%); the absence of the father (18.6%), more frequent in the urban setting (27.1%); the distance that would have to go to make the registration is only reason for 8% of the cases, but only applicable in the rural setting (15,6%).

62. The ICM (2013) data also indicate that the majority of registered children have the mother's and father's name in the registry (93.6%): the father's name is not found in 6.2% of the cases (7.1% in urban areas and 4.6% in rural areas). The Annual Report on the Status of Justice by the Public Prosecution Service, for 2015/2016, counts 6,134 children awaiting a sentence to acquire their father's name. These Data show a slight improvement compared to 2014/2015, where the total number of pending paternity investigation was over 7,000.

63. During the judicial year 2015/2016, the Public Prosecution Service carried out 223 adoptions. The vast majority of pending cases belong to the curatorship of Praia, the capital (5,226 out of a total of 6,134 unofficial paternity investigations).

64. The current measures to reverse this situation are the revision of the Civil Registry Code, in view of improving the legal framework in this matter and minimize the late birth registration. On the other hand, in 2012, the CNDHC launched a project entitled "For a Responsible Parenthood", whose main objective was to promote the rights of children by encouraging and promoting responsible parenthood. This project entailed the production and broadcast of television and radio spots, seminars, leaflets and lectures and continues to be implemented to date in the various spheres of Cabo Verdean society.

The right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment, including corporal punishment

65. As for recommendation 36 of the Committee, the corporal punishment in schools is prohibited as a result of Article 128 of the Civil Code. In relation to corporal punishment by the family/at home, ECA determines, in its article 31-point 2) Right to family protection: *In exercising the power of correction, parents should always bear in mind the right of children and adolescents to education free of violence, corporal punishment, psychic offences and other measures against dignity, which are inadmissible.*

66. The survey on family practices (ICM-2013) shows that among the measures taken against the disobedience of children from 0 to 6 years of age is the beating. This

disciplinary measure is mainly used in older children of this age group (3–6 years): 70.5% of parents/care givers report having recourse to it, which happens to a little over 1/3 of the youngest children (0–2 years). For a better understanding of the extent of this type of punishment it will be important to supplement this information with other elements such as how often it happens, the instrument used to beat (e.g. hand, other), where in the body, type of disobedience which motivates the beating, why beating instead of other disciplinary behaviours. A more thorough analysis will be important to better adjust informative and educational initiatives on corporal punishment and alternatives, in order to change attitudes and practices, as well as the degree of social acceptability that still seems to be associated with it, despite efforts already made towards its elimination.

67. Information on the strict prohibition of corporal punishment was disclosed in the context of the dissemination of the CDC and ECA. ICCA, in partnership with the network of partner institutions/NGOs, has also been implementing the Family School program that has been in operation since 2013, which aims to intervene in the field of parental education. The sessions are held every two weeks with groups of mothers, fathers or other child guardians, who together with session counsellors, discuss and reflect on parental practices and alternative forms of socialization, care and discipline.

68. Complaints regarding corporal punishment/maltreatment are made by existing mechanisms (ICCA delegations, Schools, Committees, through the Toll-Free program, police, CNDHC, etc.) and are counted at institutional level as maltreatment. The complaints are notified to the Public Prosecution Service and/or the curatorship of children (in the case of Praia City, island of Santiago), for due judicial treatment of the cases.

V. Family environment and alternative care

69. The ECA has produced a thorough review of the protection system, following the Committee's guidelines on alternative care. The ECA in its Section VI — Right to live in Family, regulates the specificities, regarding the Family environment and other type of guardianship: namely articles 30 to 35, respectively on Right to live in the family, Right to family protection, Family separation, Family home, Host family, Guardianship.

70. The law provides for the revision of temporary measures of protection, gives priority to family reception instead of the centres, and gives preference to consensual measures against those imposed. The ECA gives special attention to the restitution of the right to family life, regulating the respective procedures and providing for the hearing not only of the parents but also of the child or adolescent. It also regulates the process of family reception, given its particularities, defining its assumptions, the requirements and obligations of the foster families, the reception in institution and its rules, the supervision and he penalties that may apply to them.

71. The civil custody proceedings, notably those related to the maintenance of children and adolescents, as well as the regulation or inhibition of the exercise of parental authority, are also appropriate to the new social reality and expressed in the ECA, thus expressly repealing the Decree nº 17/83 as of April 2.

72. Regarding children's view in legal proceedings, the ECA in its Section III — Right to freedom, stipulates in Article 21 the Right of prior hearing: the child and the adolescent have the right to be heard beforehand in matters that concern them and to have their views taken in due consideration, in accordance with their degree of development.

Regulation or inhibition of the exercise of parental authority

73. The ECA, in its SECTION III, contains the specifications regarding the regulation or inhibition of the exercise of parental authority, repealing Decree No. 17/83 of April 2. ECA's Article 144 on Legiiimacy, determines that: (1) In the absence of an agreement between the parents, they may jointly or separately apply to the competent court for the regulation of the exercise of parental authority and (2) The regulation of the exercise of parental authority may also be requested by the Public Prosecution Service's representative

at the Court. ICCA states that between 2006 and 2015, it submitted to the Public Prosecution Service a total of 2,208 requests for Parental Authority Regulation.

Parental responsibilities

74. Regarding parental responsibility, the ECA (articles 18, paragraphs 1 and 2) indicates that "Parents *have common and equal responsibilities and obligations with regard to the care, development and full education of their children.*" Concerning child*care*, data from the survey on family practices (2013) show that in Cabo Verde the mother in the main caregiver of the child (80%), followed by grandparents (10%) and other members of the household (6%). The grandparents are those who assist the mother to take care of the children (35.6%), followed by the father (about 31%), the uncle or the aunt (about 24%) and the sister or the brother (20%) of children. The analysis by area of residence shows that grandparents' assistance is higher in rural areas (around 44% versus 30% in the urban setting), while the father is more frequent in the urban setting (around 33% versus 27%). ICCA and CNDHC have implemented awareness-raising campaigns for a responsible parenting.

Maintenance for the child

75. In relation to the maintenance for the child, the ECA regulates the issues related to this matter in its Chapter V: Civil Custody Proceedings, Section II Maintenance Obligations Towards Children and Adolescents, Article 138 (amount of maintenance), 141 (execution of maintenance obligation), 143 (determining maintenance in another proceeding). The ICCA Social Service Office, whose main objective is to provide daily care, counselling and referral of children and their respective families to the Prosecutor's Office, Court or other support services for children and adolescents, has had a steady increased in servicing related to regulation maintenance. According to the report of the Superior Council of the Public Prosecution Service for the 2014–2015 judicial year, there were 346 maintenance claims, 7 maintenance reviews, 90 special maintenance executions, and 142 maintenance agreements were signed.

Children deprived of their family environment

76. The ECA in its Article 35 designates the Guardianship as a way to supply the deprived parental authority with respect to the child and the adolescent and to protect his/her personal and patrimonial interests. The legal regime of guardianship is the one contained in the Civil Code.

Adoption

77. The legal regime for adoption follows from the Civil Code and The Hague Convention on the Protection of Children and Cooperation on International Adoption of May29, 1993, adopted by resolution No 105/VII/2009 of June 29, 1993. The ECA regulates the adoption procedure (Section VI — Adoption procedure) and pursuant to articles 1917 et seq. of the Civil Code, indicating its legal preconditions, its secrecy and urgency nature, the custody and trust of the child in the different phases of the process and situations, the role and intervention of ICCA in the process, the need to study the situation of adopter, monitoring and review of the decision, among others. The Office of the Attorney General is the Central Authority to ensure compliance at the national level with the obligations arising from the Convention on international adoption. In the exercise of its functions as Central Authority in matters of international legal and judicial cooperation, the Office of the Attorney General received from 2000 to July 2016, 499 applications for adoption, and the procedures for 450 applications were finalized. Also, in relation to the international adoption cases, in the 2015/2016 judicial year, all pending cases from previous years were surveyed and re-evaluated, and 204 applications for international adoption were identified: 117 from the central authorities of Portugal, 45 from Spain, 31 from France, 4 from the United States of America, 2 from Italy, 1 from the Netherlands, 1 from Ivory Coast, 1 from Luxembourg, 1 from Brazil and 1 from Austria. Out of the 204 applications, 104 were entered through ICCA from 2005 to 2009, and 100 directly from the OAG from 2009 to 2015. There were 15 requests for withdrawal (7 from Portugal, 6 from Spain, 1 from Italy

and 1 from the United States of America). Twenty full adoptions were granted (10 to requests from Portugal, 2 from Spain, 7 from France and 1 from the United States). Negative opinions were issued in 8 applications for adoption due to lack of verification of legal requirements (2 to requests from Portugal, 1 from Spain, 2 from France, 2 from the United States of America and 1 from the Netherlands). 161 applications for adoption (98 from Portugal, 36 from Spain, 22 from France, 1 from Ivory Coast, 1 from Austria, 1 from Italy, 1 from Brazil and 1 from Luxembourg) are pending. The backlog is related to the implementation of the Commission for international adoption, whose staff only started operations in December 2015.

Abuse, ill-treatment and neglect, including physical and psychological recovery and social reintegration

78. The protection system of children victims of violence, as it has been referred to, is linked to the services assigned or coordinated by ICCA, but also involves Health Delegations, National Police and Judicial Police, Attorney General's Office, among other institutions at national level.

79. ICCA within the framework of the Child Emergency Program presents data on cases of ill-treatment, neglect, sexual abuse and abandon. Between 2006 and 2015, 2,590 cases of maltreatment, 1,800 cases of neglect, 752 cases of sexual abuse and 412 cases of abandon were attended under the mentioned program.

80. In order to guarantee the protection and safety of children and adolescents in vulnerable situations, childcare facilities were created, managed by ICCA, with 5 Social Protection and Reintegration Centres, 6 Day Care Centres, a family shelter network, 3 Children's Emergency Centres and the 8001020 Toll Free program.

81. With regard to the abandonment of children by parents, the Children's Emergency Centres (CEC) of Praia City and Mindelo, which shelter children who have been abused, abandoned, and neglected recorded 36 cases in 2006 and 109 cases in 2011. The increase trend occurred particularly in urban centres and a significant number of cases are associated with drug-dependent parents and situations of domestic violence. In 2015, 26 children were welcomed at the Santiago Children's Emergency Centre and 20 children at the São Vicente Children's Emergency Centre.

82. Regarding family reintegration, the CEI of Mindelo between 2012 and 2016 reintegrated a total of 111 children, of which 70 were girls and 41 were boys. Between 2015 and 2016, the CEI of Praia returned a total of 155 children, 88 of whom were girls and 67 were boys.

83. There are several types of responses for the protection of at-risk and high-risk children, which involve the following strategies: (i) the reception centres linked to the Social Protection and Reintegration Program, which aim to guarantee the protection and safety of the child at risk and high risk in a reception facility (semi-open or closed); (ii) the Reception Centres linked to the Child Emergency Program created with the purpose of hosting children at high risk, and then reintegrating them into the family or other reception facilities; (iii) The Reception/Day Centres aiming at strengthening HIV/AIDS prevention for exposed populations, including street children; and (iv) Centres under the Nôs Kaza (Our House) project which offers positive action in the lives of children and adolescents as it prevents their entrance and permanence in the streets, keeping them safe from risk situations — which were created in 2010 and established in the cities of Praia, Santa Maria (Sal Island) and Santa Catarina de Santiago.

84. The Children's Emergency Centres (CEI) located in the islands of Santiago, São Vicente and Santo Antão, have national coverage. They are places structured for daily emergency care and protection 24 hours a day and 7 days a week, to children and adolescents, who are victims of sexual violence, mistreatment, neglect and abandon, among other cases that jeopardize their normal development. The centres serve as a temporary shelter and have the capacity to accommodate 62 children (30 in Praia, 20 in Mindelo and 12 in Santo Antão), of both sexes, from 0 to 12 years old and, possibly, from 13 to 17 years old.

85. There are also centres operating under the direction of non-governmental organizations such as the Irmãos Unidos Youth Centre and SOS Villages. In addition to these Centres, Cabo Verde has other childcare institutions, three of which are linked to the Nôs Kaza Project — Child Outside the Street, inside the School, in Praia, Mindelo and Assomada, created with the aim of sheltering children at risk, and then reintegrate them into the family or society. There is also the Nhô Djunga Youth Centre in the city of Mindelo.

86. The Family Substitute Program (Article 34, ECA) has been implemented by ICCA since 2005 and aims at presenting alternative protection for children and adolescents, with a more individualized service and institutional nature of the Centres, while not requiring new physical structures. About 50 families participate in this Program.

87. The Toll-Free SOS Children Program is a telephone service created by ICCA in 2004, aimed at intervening in circumstances of violation of the rights of children and adolescents, by receiving complaints and guiding citizens and institutions. This Program is available 24 hours a day via the toll-free number 8001020. The calls are anonymous, and the identification of the complainant is optional. Data from ICCA's Toll-Free Program show that between 2006 and 2015 a total of 764 complaints of maltreatment, 703 neglects, 153 reports of sexual abuse, 120 cases of abandon, 19 cases of psychological abuse were reported, as well as complaints related to the escape from home, difficult behaviour and family conflict. There was a gradual increase in incoming calls through the reporting line, with a total of 765 calls registered in 2006–2010, while a total of 1,829 calls were registered between 2011–2015. The highest figures are for 2012, 2013 and 2014 with 399, 410 and 528 calls respectively. In 2015, there was a decrease for 279 calls. Regarding the nature of the cases, the highest percentage of calls were cases of maltreatment (29.5%), neglect (27%), sexual abuse (5.8%), abandon (4.6 %) and other cases/demands (22%).

88. The information is immediately forwarded to the bodies involved, for due care. Depending on the nature and severity of the complaint, these may be sent to the Children's Curatorship, Attorney General's Office, Health Delegation, Judicial Police or National Police, for appropriate measures. The complaints are usually made by people who are friends, relatives or acquaintances of the victims, by the institutions that work in the area. In some cases, it is the victims themselves who seek such support. Upon receipt of the complaint, the Toll-Free Program Staff will go to the place of the incident to verify its veracity. Once the complaint has been proven, the process of judicial proceedings begins.

89. For the implementation of the Toll Free, ICCA has established partnership agreements with CVTelecom through the provision of the Free Line — 8001020 and several public agencies, namely: Ministry of Interior (National Police); Ministry of Education (School Delegation of Praia); Ministry of Health (Praia Health Delegation); and Ministry of Justice (Judicial Police).

VI. Disability, health and welfare

Survival and development

90. Cabo Verde has achieved substantial gains in terms of health, according to the statistics presented in the common core report (paragraphs 28 to 29), including the reduction of child mortality. In addition, there is a reduction in the fertility rate (paragraph 17), a trend that also applies to the specific fertility rate among adolescents (15–19), from 92 per thousand in 2005 to 62 per thousand in 2010. It is also positive the evolution of births attended by skilled health professionals (para. 29) and prenatal visits, including a marked improvement in access to services in rural areas.

91. The implementation of the national health policy has contributed significantly to improving the living conditions of the populations and to the country's development. With regard to the State Budget, Cabo Verde applied on averaged between 2005 and 2013, 7.1% of funds to the health sector.

92. In 2013, as part of the IHP + Global Initiative, of which Cabo Verde is part, the Ministry of Health initiated a dialogue with the various partners and institutions involved in health care, notably, public institutions, including municipalities, the private sector, civil

society organizations and development partners, culminating in the signing of the National Pact for Health in February 2014 and the integration of new partners in 2015. This national dialogue on health implemented through a Forum on Health in all the islands and regions of the country, has always had the Millennium Development Goals as the main theme together with the 2012–2016 National Health Development Plan.

93. The under-5 mortality rate decreased by almost half between 1990 and 2014, from 56 to 22.5 per thousand live births in 2014. The infant mortality rate (under 1 year of age) decreased by 51.6% between 1990 and 2014, from 42 to 20.3 per thousand live births in 2014. In 2014, it was recorded the lowest absolute value ever in the historical series recorded from 1990 to 2014, in terms of infant deaths (less than 1 year of age). These gains are the result of efforts made to improve the protection of children's health, increase coverage for access to health care, including vaccination, quality and availability of services based on improved network and health infrastructure, as well as the development of human resources (quality and quantity).

94. The decrease noted between 2012 and 2013, of around 3 percentage points, is linked to the reduction of deaths occurring in the age group from 1 to 4 years old, from 42 deaths in 2012 to 24 in 2013. The external causes, respiratory diseases and injuries account for 73.9% of this decrease. In 2014, the main causes of death were: trauma (29%), external causes (25%), infectious and parasitic diseases (12.5%).

95. In the age group 0–1 years, which in 2014 was responsible for 89.9% of deaths in children under 5 years of age, the main causes of death are perinatal conditions, responsible for 63% of them. There is also a tendency for the concentration of deaths in children under 1 year of age in the early neonatal period (in children less than 7 days old): they represent 56% of deaths in children under 1 year of age in 2009, and 62.3% in 2013 and 53.4% in 2014. This situation indicates that, despite the increase in health quality in recent years, efforts should be doubled in terms of quality of care offered to pregnant women, childbirth and newborns, since mortality is related, among other causes, in descending order to: perinatal conditions representing 62.3% of total infant deaths (134 deaths), congenital malformations (18 deaths) and infectious and parasitic diseases (14 deaths).

Health and health services

96. As part of the acceleration strategies to achieve the MDG targets related to child mortality, the neonatal services of the Agostinho Neto Hospital (Praia, Santiago Island), Baptista de Sousa Hospital (São Vicente Island) and Regional Hospital Santiago Norte have benefited from medical equipment such as infant ventilators to ensure the survival of newborns in the country's major hospitals where the highest percentage of deliveries occur. The Country has three Hospitals accredited in the Baby Friendly Hospital Initiative (BFHI): Hospital Batista de Sousa in 1996, Hospital Regional Santiago Norte in 2002 and Regional Hospital of Ribeira Grande de Santo Antão in 2015. Also in 2011, the Agostinho Neto Hospital benefited from the implementation of the first Human Milk Bank (BLH) in the country and two Human Milk Harvest Stations (PCLH) at the Fazenda Reproductive Health Centre and Tira Chapéu Health Centre, in the city of Praia, in 2015. In terms of capacity building, health professionals benefited from training courses in clinical management for neonates and neonatal emergency care, training in management in breastfeeding and processing of Human Milk. Some paediatricians and neonatologists of the 2 Central Hospitals participated in intensive training courses in neonatology in Portugal; Nutritionists, Doctors, Nurses and a Laboratory Technician participated in a training internship in Human Milk Bank in Brazil. Supervision and training activities on neonatal emergency care were conducted targeting health professionals in all municipalities of the country. A National Perinatalogy Commission was created to monitor the performance of health services on child health and maternal health, namely, through the systematic conduct of clinical audits for all infant and maternal deaths occurring in the national territory.

97. The protection against diseases that can be prevented by vaccination is an important axis of the National Health Policy for 2020 and the 2012–2016 PNDS. Vaccination under the age of 1 year, offered free of charge, now includes 10 vaccines, compared to 6 vaccines it includes in 2000. In relation to the proportion of vaccinated children under 1 year of age, in 2013, all vaccines had a coverage rate of more than 90%. Specifically, the figures were

94% for BCG, 93.2% for Polio, 93.1% for Pentavalent and 90.7% for Measles. These data indicate the great effort that the country has made in order to achieve universal coverage in terms of vaccinated children.

98. In 2013, a National Vaccination Campaign against Measles and Rubella was carried out, targeting people aged 9 months to 24 years. This campaign achieved a coverage rate of over 95% in all age groups and among children aged 9 months to 1 year, coverage was over 98%. The vaccination campaigns were accompanied by communication (TV and radio spot, outreach activities, leaflets) aimed at promoting campaign adherence, but also increasing access to information on vaccination, health and associated rights by the population.

99. Every three years, vaccination campaigns are organized with an emphasis on Measles and Poliomyelitis being the last one against Poliomyelitis in 2014, with a 98.8% Coverage, in view of the global strategies for elimination of measles and the eradication of poliomyelitis. Its impact is demonstrated by the fact that, after 19 years, there have been no cases of measles and about 17 years with no polio cases in the country. It is important to note the great gain of the Country in the fight against Poliomyelitis, having received the Poliomyelitis-Free Country Declaration on November 25, 2016.

100. The Ministry of Education and the Ministry of Health and Health Centres/Centres have collaborated in iron supplementation and deworming initiatives in Primary Education. There is a reduction in the prevalence of anaemia in children under 5, from 70.4% in 1996 to 52% in 2009. As for parasitosis (helminths) in children aged 6 to 10 years, the prevalence rate of 49.2% was reduced to 21% from 2005 to 2012.

101. On the other hand, the implementation of a monitoring and quality control system of iodized salt allowed good results in terms of Iodine Deficiency Disorders. In children aged 6 to 12 years, the prevalence decreased from 25.5% (moderate endemic) to 7.6% (mild endemic) observed between 1996 and 2010.

102. The rate of maternal deaths per 100,000 live births decreased from 79 to 9.4 between 1990 and 2014, placing the country in a prominent position when compared to other countries in sub-Saharan Africa. The vast majority of deliveries are performed in hospital facilities (95.6% in 2014). In the field of obstetric and gynaecological care, significant advances were registered with the provision of services in the context of Central and Regional Hospitals and also of Reproductive Health Centres at the municipal level. Cabo Verde is on track to meet the MDG target for prenatal care coverage: from 2007 to 2014, the rate of pregnant women attending at least one prenatal visit rose from 74% to 99.3%. However, regional disparities are recognized since the rate of capture of pregnant women for prenatal visits in predominantly rural municipalities is lower. In 2014, 95.6% of births were attended by qualified health professionals, which implies an increase of 21.2 percentage points in relation to deliveries made in 2007. One of the factors that have contributed to the increase in coverage is the improvement of maternal health services in rural areas: in 1998 only 36% of births in these areas were attended by qualified health professionals, but in 2005 this proportion increased to 63, 5%. It is noteworthy that some Health Centres started performing uncomplicated deliveries. All islands received monitoring and training visits on prenatal care, post-partum and family planning. Medical equipment was distributed to support prenatal and pre-delivery, delivery and post-partum care.

103. In terms of health infrastructures, in 2014, the country had 2 central hospitals located in Praia and São Vicente, 4 Regional Hospitals distributed by the municipalities of Ribeira Grande de Santo Antão, Sal, Santa Catarina and São Filipe, 5 Reproductive Health Centres and 28 Health Centres, while in 2009 there were 17 Health Centres and 3 Regional Hospitals. The Basic Health Units (108 in 2013) are installed in all municipalities and are essential infrastructures in the implementation of health policy in the Country. Consultations of children under 1 year of age have increased considerably: from 2009 to 2013, they increased by 29.2% and by 2014, 98.7% of children of this age are in contact with health services. There was also an increase in the average number of consultations, from 7.8 in 2009 to 10.2 in 2014, a variation of 26.9% in the corresponding period.

104. In terms of women's health, the main Health Centers and Reproductive Health Centres provide family planning, prenatal and post-partum services, as well as gender

approaches on sexually transmitted infections, including HIV/AIDS and the Prevention of Mother-to-Child Transmission of HIV, in line with the National Health Policy which provides for an integrated approach to women's health since 2006.

105. With regard to HIV/AIDS, awareness of the possibility of mother-to-child transmission of HIV has improved: in 2015, 52% of the population knew that there is a possibility of reducing the risk of mother-to-child transmission of HIV when taking a medicine, when in 2015 little more than 1 in 5 people had this knowledge; the proportion of people who know that HIV can be transmitted through breastfeeding is around 80% in women and 70% in men; in relation to knowledge of HIV transmission during pregnancy, 64% and 67% respectively for women and men; the knowledge that HIV can be transmitted during childbirth is 78% in women and 6% in men. However, if one considers the proportion of people who are aware of these 3 pieces of information simultaneously, the proportion drops to 46% among men and 40% among women.

106. The implementation of prevention strategy for the mother-to-child or vertical HIV transmission since 2005 has brought enormous benefits to the health of children. Vertical (mother-to-child) transmission of HIV has been steadily decreasing, from 5.6% in 2011 to 2.9% in 2013, remaining at 2.9 in 2014. Since 2011, as part of the measures to promote breastfeeding, the first human milk bank (BLH) in Cabo Verde has been inaugurated in Agostinho Neto Hospital (Praia, island of Santiago), aiming at promoting breastfeeding in cases where the mother is unable to feed the newborn or the mother is HIV-positive. Between 2011 and 2015, the BLH registered a total of 1,543 donors, accounting for a total of 1,193.6 litres of breast milk donated, 908 litres distributed to 2,079 newborns.

107. Universal and equitable access to HIV testing and antiretroviral treatment is guaranteed free of charge. Care is offered at the health centers, central and regional hospitals throughout the country. All pregnant women have access to HIV information and testing during prenatal care, with around 90 cases being diagnosed each year in the universe of about 11,000 pregnant women, who underwent the test. Antiretroviral treatment and regular follow-up of all pregnant women and children with HIV/HIV-positives are ensured.

108. In the context of the national response to HIV/AIDS, Cabo Verde has chosen not to differentiate orphaned children because of the HIV/AIDS epidemic, thus avoiding the possibility of being discriminated against. Support opportunities, from which orphaned children can benefit are those available to vulnerable children, in particular school and nutritional support. Data show that the ongoing efforts have contributed to ensuring equal educational opportunities for all children, regardless of their orphan status. In 2010, the ratio of school attendance among orphans and non-orphans (10–14 years old) is 1, which applies to both boys and girls, in a context of high school attendance rates (above 97% in 2010).

Adolescents' health

109. In terms of adolescent health, the National Health Policy includes the programming of activities aiming to protect and promote health. On the one hand, within the framework of the State's commitment to universal access to family planning and sexual and reproductive health services and reproductive rights, on the other hand, taking into account the health risks posed to young mothers.

110. The legal framework on the protection and promotion of adolescents' rights to sexual and reproductive health information and services as well as regular and full access to these services has been strengthened with the adoption and entry into force of the Child and Adolescent Statute. In terms of services, the quality of care has been strengthened in the 2 units for adolescent specific care in Reproductive Health Centres of the 2 main cities (Praia and Mindelo). Subsequently, activities were carried out to train health professionals, create and improve conditions for the adolescent specific care in 3 health centres in the city of Praia, and also covering other islands/counties.

111. In 2012, the Sexual and Reproductive Health (SRH) services for adolescents, established since 2008, were evaluated, showing that although they reach the necessary coverage, there is a need for adjustments in terms of infrastructure and training of human resources. The recommendations focus on the need to: (i) incorporate gender discussions

into SRH interventions; ii) take advantage of the male presence in the Youth Centres to deepen this discussion, especially with regard to the exercise of masculinities; iii) capitalization of the window of opportunity opened by the GBV Law to deepen the discussion of the different expressions of gender inequalities, especially those reflected in SRH practices; iv) incorporate a sexuality approach into interventions; v) strengthen the educational work on sexuality in the communities, with a view to reaching the family; vi) promote peer education; and (viii) on-going capacity building of SRH service staff. A Report on the Situation Analysis of Adolescents' Reproductive Health was also prepared in 2015, which fed the preparation of the Strategic Plan for Adolescent's Health in 2016.

112. At the secondary level, there are Information and Guidance Offices (EIOs), which operate under a peer education approach on Sexual and Reproductive Health for youth/adolescents, topics related gender equality, drug use prevention, HIV/ IDS, interpersonal relations, among other topics relevant to youth and adolescents. After a pilot project with 2 EIOs, the Ministry of Education extended the initiative to additional 22 secondary schools from 2010 to 2016. In the context of EIOs, 797 youth peer educators and 20 EIO support teachers were trained. As a result, by 2016, a total of 46,558 students benefited from prevention activities based on the promotion of social skills.

113. Health administrative data show a decrease in the proportion of pregnant women attending prenatal consultations, who are adolescents (18 years and younger): in 2014 the proportion was 18.2%, while it was 23.9% in 2011 and 30.5% in 2010. Adolescents under 17 years of age represent 4% of all pregnant women in 2014, representing 6% in 2011 and around 11% in 2007.

114. The ECA, with a view to building full autonomy for children and adolescents, highlights the responsibilities of families, institutions and policies in terms of the right to access information/education on sexual and reproductive health (SRH) (Article 43), which allows a full development, a responsible sexual behaviour and a responsible, healthy, voluntary and risk-free parenthood. It establishes the access to free and confidential SRH programs by specifically defining, for adolescents 14 years of age and over, the right to request and receive these services, which is a provision that takes into account an earlier limitation of existing SRH programs for adolescents, which implied that the adolescents had to be accompanied by a responsible adult, in order to access contraceptives. The same article indicates that medical interventions, such as voluntary termination of pregnancy (legal in Cabo Verde under the specific legislation in force), cannot be performed without prior information to the child/adolescent, and in the case of adolescent girls, in case they oppose to the procedure, it cannot be carried out without judicial authorization.

Children with disabilities

115. The National Council for the Rights of Persons with Disabilities shall promote, coordinate and monitor the implementation of the national policy on capacity development, rehabilitation and integration of persons with disabilities. This body is guided by the National Action Plan for Persons with Disabilities.

116. The Ministry of Education is committed to promoting the transformation of the education system so as to consolidate inclusive education, providing that all students can participate in common spaces and processes of teaching and learning. The Common Base Document provides information on existing educational and social measures, in paragraphs 236 to 239. In addition, the following paragraphs specify the complimentary responses provided by civil society organizations.

117. Regarding the status of the Cabo Verdean Sign Language, the first version of the glossary of the Cabo Verdean sign language has already been revised and the second stage of the collection of gestures used by Cabo Verdean deaf people aiming at the developing the Cabo Verdean Sign Language Glossary has been completed.

118. In 2016, 21 children with microcephaly were identified, of which 1 died with microcephaly. The majority of these children were born following an outbreak of the Zika virus in the country in October 2015, when the 75 pregnant women infected with this virus were followed closely by the health services. Of the 20 babies born with microcephaly, 15 are from the island of Santiago, 4 from Fogo Island and 1 from Maio. The babies received

special care form health services, in terms of neurological and psychomotor evaluation, in view of establishing a psychomotor rehabilitation and physiotherapy. Families, in particular mothers, are receiving technical support for a better understanding of microcephaly and support with early stimulation, and received social support, having been granted a social pension as well as support for immediate needs (free-pass for transportation for 4 months, for medical visits, purchase of diaper, and exemption of health fees). A specific spot on microcephaly situations was broadcast in the media, calling for care and love they need as any child.

Social security

119. In the social security sector, in 2010 the government approved the amendments to the social security system, which allowed integration of issue of children with disabilities, therefore, broadening the scope of minimum social pension.

120. The number of insured family members (descendants/children) enrolled in the National Social Security Institute (INPS) increased from 68,023 in 2010 to 85,904 in 2013, and 88,500 in 2014, which shows a positive evolution of the situation relating to social security coverage.

Appropriate standard of living

121. In terms of ensuring a standard of living appropriate to children and adolescents, progress can be pointed out in terms of poverty reduction in the country, as reported in the common core report (paragraphs 24 and 25), as well as in terms of their nutritional status (paragraph 27).

122. The 2013 survey on family practices provides important data on the practices of Cabo Verdean families in relation to the development of children aged 0–6 and the conditions in which they live. In terms of hygiene, 49% of children in this age group have a habit of washing their hands before meals and after using the bathroom. The main source of water supply is the public water supply for 59% of the households with children within this age group, 20% are supplied to the public fountains, and despite progress, 11% use other sources (reservoirs, springs, wells, etc.). Water supply through the public network is greater in urban areas. The data also indicate that 53.4% of the households treat drinking water. In terms of sanitation, 40% of the households have access to sanitary facilities with flushing system and 30% without flushing system. About 30% of households have no access to toilet seat or latrine, mainly in rural areas (46%). In terms of electricity, 88% of households with children within this age group have access to electricity. This accessibility is greater in the urban area (94%) than in rural area (79%). Despite some progress, 12% of the surveyed families used candles, especially those in the rural area (21%). ICT access is high, with 92% of households with children between 0–6 years old with mobile phones, 83% with television and 59% with radio. About 32% of households have a landline telephone, 31% have a laptop, 23% have internet access.

123. However, 54% of households with children aged 0–6 express financial difficulties in buying food, which is a situation that affects far more rural households than urban households (73% against 42%). It should be noted that poverty affects especially large families: 61% of poor people in Cabo Verde live in a household with 6 or more people (IDRF, 2015).

124. The legal framework on social interest housing safeguards the role of women as heads of household. The data from the "Casa Para Todos" (House for All) Program, a project that emerges as part of the implementation of the National System for Social Interest Housing, began in 2010 and provides for the construction of 6,010 apartments for all levels of income. 2,410 housing units were completed, 3,570 are under construction and 50 are yet to start construction. The program envisaged the adaptation of 5% of all apartments for people with disabilities (adapted to wheelchairs with appropriate accessibility). In the process of delivering the houses, it is noted that 54.1% of the contracts are signed with households where the woman is the sole contractor.

VII. Education, leisure and cultural activities

Education, including vocational training and guidance

125. All strategic planning instruments of the country, notably, the DECRP I, II, and III agreed around the priority to improve the qualification of the Cabo Verdean population, which is a strategic resource for the national development process. The Basic Educational System Law, revised in 2010, aims to qualify the sector to better respond to the demands arising from the country's development and its *Transformation Agenda*. Among the main innovations stand out the curricular revision, the generalization of pre-school education, the extension of compulsory schooling up to 8th grade and the meeting of conditions for its gradual extension to 12th grade, the harmonization of higher education with the European model of Bologna, the strengthening of special education, the development of a policy consolidating the Cabo Verdean language, among others.

126. Cabo Verde has established universal primary education as one of its main targets, and this indicator has been achieved since 2000: more than 90 out of every 100 children between the ages of 6 and 11 attend primary school and 94 in every 100 school-age children complete the last year of this level of education (6th year). The net enrolment rate in primary education increased by 21.3 percentage points, from 71.5% to 92.8% between 1990 and 2013/2014. Concerning preschool, between 2010 and 2014 there was an increase in 26 pre-school education facilities, which resulted in an increase in the hiring of 158 teachers for the preschool.

127. The literacy rate for young people aged 15–24 years was 98% in 2013, an increase by 8.7 percentage points compared to 1990. Parity among young women and men was reached for this indicator.

128. Regarding the access and permanence of pregnant minors in educational facilities, ECA has consolidated and determined that the pregnant child/adolescent cannot be encouraged to interrupt her studies or to leave school (Article 47), which responds to a measure issued by the Ministry of Education (MED) in 2001, recommending that pregnant students interrupt their studies to resume them after childbirth.

129. With regard to vocational education, it is the responsibility of the State to develop a system of school and vocational guidance that allows young people and families to make an informed choice about the academic or professional career (article 67). The educational offer of vocational education has been increasing in the country: from 2001 to 2008 the average annual vacancies were 980 and between 2009 and 2013 the average annual vacancies was 3,270.

130. In Cabo Verde, formal technical education was also implemented in the last cycle of secondary education: in 2011, the technical pathway of formal education represented almost 3% of secondary education.

Aims of education

131. The right to education is protected by the constitution, which in its article 78, states that education is a right of all, that it must be integral and aim at the human, moral, social, cultural and economic promotion of citizens and prepare the citizens for the exercise of professional activity and participation in public life and exercise of citizenship, among others. It is the responsibility of the State, in this context, in particular, to guarantee the necessary conditions for the full exercise of this right, under conditions of equal opportunities for access and school success.

132. The Basic Educational System Law (Law no. 103/III/90, of December 29, recently revised by Legislative Decree No. 2/2010, of May 7) is the Centre of the infra-constitutional legal regime for education. Article 4 states that all citizens have the right and the duty of education, and the state must fulfil the required conditions for the exercise of the rights and duties of citizens in the field of education, watching for the "*development and improvement of the public education system, with priority for compulsory schooling*." It foresees the extension of compulsory schooling from 6th grade to 8th grade and recommends the possibility of gradually extending compulsory schooling up to 12th grade

of schooling, depending on the creation of sustainability bases, upon conditions to be determined by the Council of Ministers' Resolution.

133. As previously mentioned and detailed in the Common Core Document (paragraph 196), Education for Citizenship was integrated into the school curricula, aiming to provide a privileged space for the promotion of ethical and civic values in view of building committed citizens.

134. The attribution to the Artistic Education of a central and permanent place in the study plan aims to develop the aesthetic sense, the creativity, the imagination and the cooperation in societies more and more based on the knowledge, without neglecting the consolidation of the Portuguese language teaching , the promotion of the Cabo Verdean culture and art, the development of taste for research, the promotion of experimental teaching, laboratory practices and information and communication technologies (ICT) also guide the construction of the present drafts of study plans for the Basic and Secondary Education.

135. One of the country's main commitments and investments, since national independence, has been in improving the quality of human resources. This commitment has allowed a positive evolution of the education sector. This vision allowed the implementation of policy measures to guarantee basic schooling, reduce illiteracy, generalize access to secondary education, and expand higher education. The strong investment in the education sector over the years has allowed the extension of the school network and guaranteed access to education throughout the country.

136. It is the responsibility of the State to guarantee free, compulsory and universal education up to 8th grade of schooling and promote the creation of conditions to extend compulsory schooling until 12th grade of Schooling (Article 13 of Legislative Decree No. 2/2010, of May 7).

137. Basic education is free, being the level of education in which there are no registration fees or monthly tuition fee. Household school costs include expenses relating to uniforms (gowns), school supplies, examination expenses, and there are various programs for the donation of gowns and school supplies, promoted either by public institutions, civil society organizations or even Cabo Verdean emigrants, who mobilize their host communities to donate school materials to their home communities. School books are subsidized and purchased by families at a relatively low price. The objective of the Cabo Verdean Government is to gradually implement free education, from primary to secondary level.

138. Secondary education, on the other hand, presupposes that families pay a tuition fee for the permanence of children in school. There is differentiation for payment of tuition fees according to the socio-economic conditions of the families and the number of children enrolled in the system.

139. Regarding this matter and in line with the goals of the Government's Program for the IX Legislature (2016/2020), from the academic year 2017/2018/2019 on, it is expected that families will be exempted to pay school fees (students in 7th and 8th grades). It is estimated that by 2023 Cabo Verde adopts the exemption of school fees in compulsory primary education up to 12th grade of schooling.

140. Budgetary appropriations for education accounted for about 15% of the General State Budget, in the past few years. Appropriations between 2010 and 2015 were respectively: 13.7%, 13.2%, 14%, 14.6%, 15% and 16.4% of the State Budge.

Education facilities

141. In the 2014, there were 526 preschool education facilities, 420 primary education facilities and 50 secondary education facilities. The 2014 data indicate that there were 22,144 pre-school students, 65,954 students attending primary education and 52,427 students enrolled in secondary education.

142. The number of facilities and vacancies for pre-school children aged 3–6 years has been steadily increasing in Cabo Verde. Pre-school education is part of the objectives of

child protection and consists of a set of actions linked to the family, aiming at on the one hand the development of the child and, on the other hand, their preparation for joining the school system. In 2001, there were 19,810 children enrolled in preschool, a number that in 2010 increased to 20,201 and in 2014 to 22,144. Pre-school coverage is higher for children in the age group of 5 years, that is, as children approach the age of entry into Primary Education. Private education plays an important role in this subsystem, since in the school year 2008/2009, 64.3% of the subsystem's staff were enrolled in private schools. The Municipalities' initiatives are also important. In fact, despite being recognized as part of the educational system, preschool is not offered by the State. Measures are in progress to generalize access to preschool, particularly for the ages before entering school, which implies increasing vacancies/facilities and also supporting the poorest families with attendance cost (payment of school fees).

143. The measures to promote access to pre-school include the increase in the number of Kindergartens by the Municipal Councils, NGOs and religious entities. The strategic objective of the Government's program is to consolidate and implement quality pre-school education, with a view to providing a social, educational and formative response. In order to improve the effectiveness of preschool education policies and to reduce economic and social disparities, this subsystem will focus on four key pillars: integration of preschool into the formal education system; subsidization of the most needy in order to promote the inclusion of all children from 4 to 6 years of age, improvement of the working conditions of preschool educators (public and private network) and consolidation of the professional career of child educators (through training programs and salary framework).

144. In 2014, the dropout rate in primary education was 1.1%, which is 0.6 percentage points lower than in 2010. Dropout is more frequent among boys, both in primary and secondary education. The dropout rate recorded in secondary education was 5.8% in general (6.9% boys and 4.8% girls).

145. In the sphere of social school intervention, important initiatives have been implemented to ensure equality and equity in access to different levels of education and to promote school success. In this context, the initiatives include the provision of hot meals to children National Canteen Program , created in 2010 and financed and managed by the Government of Cabo Verde, benefiting 90,000 students, and expected to be extended to an additional 40,000 students from primary school, extended to 8 years; the implementation of a school health program; the granting of scholarships and study grants to students in Secondary and Higher Education; school transportation, covering 3,050 students from all municipalities; student residences intended to accommodate students from difficult-to-reach areas, with 5 residences (Praia, Santa Catarina, Porto Novo, Ribeira Grande and São Vicente) currently benefiting 454 students; school fees to underprivileged students covering 8,000 secondary school students; (kits), a program that began in 2003 and which benefited 40,000 Primary Education students; the sponsorship program for children, an initiative launched in 2003 that has already benefited close to 23,000 children with regard to the various social services provided by FICASE. These activities are developed by FICASE in partnership with Ministries in charge of the social matters, International Organizations, Municipalities, NGOs, community associations, companies and individuals.

146. The *Mundu Novu* program constitutes another axis of structural intervention at educational policy level. It aims at fostering the development of new ICT-based skills, with key components being technological infrastructures and the promotion of digital inclusion, by facilitating the access of the most disadvantaged classes to new technologies. Of the total of 414 primary schools and 46 secondary schools in 2015, the program has already covered 89 schools nationwide, of which 45 are Secondary and 44 Primary schools. The equipment, focusing on technologies for classroom use, includes laptop/desktop computer, speakers, projectors, screens, printer, interactive whiteboard. The training of educational agents for their use has been a priority, and the program has already trained some 5,190 primary and secondary school teachers (2,132 from primary schools, 3,044 from secondary schools) and 14 teachers from the University Institute for Education (IUE). There are currently 30 secondary schools connected to the internet with the state network and konekta squares (wifi). The program also provides for the access to computers, tablets and smart phones to teachers and students in secondary and university education, through a

partnership with telecommunication operators, which allows teachers and students to acquire such computer equipment at a reduced cost (to date 2,396 pieces of equipment). The financial cost-sharing percentage of teachers and students varies between 15% to 35%. The partnership was developed in the context of the debt that the telecommunication operators (CV Móvel and Unitel T+) have with the Cabo Verdean government, regarding the 3G license.

Leisure, recreation, cultural and artistic activities

147. With regard to the promotion of cultural and recreational activities, these are ensured at national level by public and civil society institutions. The Municipalities also play an important role in promoting activities within the municipalities' celebrations, in commemorating the dates on children (Children's Day and African Children's Day), Child-youth Book fairs, literary voice and dance competitions, and provide Christmas Parties to Children, especially the most disadvantaged. NGOs and religious confessions also play an important role concerning the range of activities they provide to children in particular during school holidays, through camping and exchanges with children and youth; sport tournaments in their respective regions, visits and exchanges with children and youth from other organizations, as well as inter-island visits, among other activities.

VIII. Special measures to protect children

Children in situation of emergency

148. Emergency situations in Cabo Verde can be linked to (i) natural factors — floods, volcanic eruptions, etc.; (ii) epidemiological factors such as outbreaks of certain diseases; and (iii) disasters caused by fires or other circumstances. These three situations are typified in the National Contingency Plan currently in force in the country. The Contingency Plan brings the answers to a series of emergency situations, at the same time, Civil Protection is organized to respond to situations quickly.

149. An example of the effective response was the Dengue epidemic in 2009, which was rapidly reacted upon by institutions, having been controlled and avoiding major losses to society.

150. In 2009 Cabo Verde hosted 15 children on fishing boats, along with adults from other African countries. ICCA and UNICEF worked together to ensure that children did not return to their country of origin until safe return conditions were created.

151. In 2014, at the time of the volcano eruption on the island of Fogo, a number of public and private entities, civil society organizations and religious confessions, especially ICCA, UNICEF and CNDHC, provided psychological support to children and families displaced from Chã das Caldeiras.

Children in conflict with the law

Administration of Justice for children

152. The issue of children in conflict with the law was included in the 2006–2011 Strategic Plan of the Ministry of Justice, in line with the promotion of effective social reintegration of these children and adolescents. This strategy aimed, through practical actions (i) the creation of a structure of internment and social reintegration; (ii) better service to children and adolescents, through the training of technicians and system operators and the adequacy of legislation; and (iii) the professional qualification of the children aiming at their effective reintegration into society.

153. One of the training areas has been privileged is juvenile justice, taking into account the need for specialization in this area. Cabo Verde lacked knowledge and know-how on alternatives to deprivation of liberty, restorative justice, among others. A delegation from Cabo Verde participated in the World Conference on Juvenile Justice (Geneva, 2015) and in November 2015 a conference on Juvenile Justice was held in Cabo Verde.

Treatment of children deprived of their liberty

154. In 2006 the new institutionalization regime was approved for children aged between 12 and 16 years and who are agents of some fact qualified by law as a crime, for Legislative Decree No. 2/2006 of November 27, which entered into force in February 2007. This law also regulates the organization and operation of the Socio-educational Centres. The socio-educational measures aim at the education of the child for the right and his/her integration into the community life, in a dignified and responsible way. The socio-educational measures can only be applied through procedural intervention, composed of two phases: the investigation, presided over by the Public Prosecutor's Office and the judicial phase presided over by the Judge, being sure that the intervention of both is not dispensed in any of the phases to guarantee the fundamental rights. In the course of the proceedings, the first institutional contact of the child with the institutionalization structures is avoided, as far as possible, providing for their delivery to the parents, legal representative or person who holds his/her de facto guardianship, with imposition of obligations, whenever accused of committing an act qualified as a crime by law. Whenever possible and appropriate for educational and intended purposes, the court shall associate the socio-educational measures with the collaboration of parents or other meaningful persons for the child, family members or not.

155. From 2009 to 2016, 36 socio-educational measures of institutionalization were applied at the Orlando Pantera Socio-Educational Centre, (13 institutionalization measures in a closed regime, 16 institutionalization measures in a semi-open regime and 8 institutionalization measures for 6 months, of which 4 in closed regime). The majority of the children are male, comprising 32 children (10 are 16 years old, 11 are 15, 5 are 14, 3 are 13 and 2 are 12 years old) and 5 females (4 are 14 years old and 1 is 15 years old). The vast majority of the children who were institutionalized in a closed regime were because they committed acts such as sexual assault, drug trafficking, murder, theft and possession of weapons.

156. In accordance with article 17 of the Criminal Code (Legislative Decree 4/2003 of November 18, as amended by Legislative Decree 4/2015 of November 11), persons who have reached the age of 16 are subject to criminal responsibility, and are therefore liable to a conviction, including a custodial sentence. However, Decree-Law 25/88 of March 26 (which lays down the general rules governing the execution of sentences involving deprivation of liberty ordered by sentencing or judicial judgement) provides in its article 14 that a prisoner aged 16 and 21 years should remain, whenever possible, in appropriate cells that separate him/her from other inmates, and should enjoy a more favourable treatment regime. Article 24 stipulates that a prisoner has the right to be assisted by a counsellor assigned officiously in all matters relating to his/her prison situation and is exempt from procedural costs to defend his/her rights in relation to his/her prison situation (Article 25). With a view to their reintegration into society, the prisoner is provided with social assistance, which also includes the prisoner's connection with the social environment, especially with the family (article 31, sub-paragraph a), and is also guaranteed periodic communication with the outside (friend and relatives), either by correspondence or by visits — Articles 49 and 51).

157. Between 2013 and 2016, the Central Prison of the Praia, located on the Island of Santiago, received 7 children aged 16 to 18 years old (4 were 17 years and 3 were 18 years); the São Vicente Island Prison also received 7 children (2 were 17 years and 5 were 18 years); the Prison of Fogo received 9 children (1 was 16 years old, 2 were 17 and 6 were 18 years old) and the Prison of Sal Island received 3 children (1 was 16 years old and 2 were 17 years old).

158. The Constitution of the Republic of Cabo Verde guarantees the inviolability of human life and physical and moral integrity of persons. In accordance with article 28, paragraph 2, no one shall be subjected to torture, cruel, degrading or inhuman treatment or punishment, and under no circumstances shall the death penalty be applied. The Penal Code establishes the limits of the sentence of deprivation of liberty and of the security measure under article 45, stating that in no case shall there be a death sentence or custodial sentence or a security measure perpetual in nature or of unlimited or indefinite duration.

159. With the approval of the Legislative Decree No. 2/2006, to children between 12 and 16 years old who practice a fact qualified by the law as a crime is applied a socio-educational measure, with institutionalization as the most severe sentence in a Socio-Educational Centre, under a closed or semi-open regime. In any case, the institutionalization measure may not, in no case, exceed five years, nor exceed the maximum penalty for the crime corresponding the act (Article 14 sub-paragraph a).

Physical and psychic readaptation and social reintegration

160. With regard to children covered by Legislative Decree 02/2006 of November 27, the DGSPRS is the central service of the State in charge of, in coordination with other competent public services and bodies , designing, preparing, proposing, executing and enforcing, monitoring, evaluating and supervising the execution of sentences and other measures involving deprivation of liberty, the institutionalization of children in conflict with the law and dangerous not-punishable children due to psychic anomaly and the social reintegration of inmates and institutionalized minors.

161. Regarding interventions with children, the Educational Custodial services coordinate all operational activity in this area, and also ensures supervision, vacancy management and monitoring of the functioning of the Educational Centres and other services assign to them.

162. The Orlando Pantera Socio-Educational Centre is located on the island of Santiago, with the capacity to accommodate 30 children of both sexes and aims to promote the social reintegration of children and adolescents in conflict with the law. In terms of human resources, the Centre has 16 collaborators (1 coordinator — psychologist, 4 professional social reintegration technical staff, 1 social educator, 1 social worker and 3 security agents). The pedagogical and therapeutic programs and methods used at the Orlando Pantera Socio-Educational Centre are subject to the principle of adequacy, taking into account the purpose and duration of the institutionalization and the needs of the children, notably, in terms of personal and social development and strengthening of their sense of responsibility in a relationship of empathy.

Children in situation of exploitation

Economic exploitation, including child labour

163. The Constitution of the Republic, with regard to the child protection, establishes the prohibition on child labour exploitation as an insurmountable limit (article 73, paragraph 4 of the CRCV) and prescribes that children have the right to special protection against the exploitation of child labour (Article 73, paragraph 3, sub-paragraph c) of the Constitution of the Republic). Thus, in addition to enshrining the principle of special protection and the integral development of the child (Article 73 (1) and (2), Article 89 (1)), the Constitution imposes a duty on the State to protect children against child labour exploitation, paragraph 3 (d); Article 89 (2) and (3)).

164. Also, regarding the minimum age for admission to work, the ECA (Section XI — Right to Protection at work — Article 61) establishes that the minimum age for adolescent's paid work shall be fifteen years. The State may set other minimum ages, above fifteen years, for other work of a dangerous nature or that are classified as the worst forms of child labour, especially those that may interfere with their education or that are harmful to their health or physical, mental, moral and social development.

165. Data from the survey on child labour (data collected in 2012) show that 10,913 children between the ages of 5 and 17 are engaged in economic activity, representing around 8% of all children. Boys predominate (63% of children who engage in economic activity), which means that 9.6% of boys between 5 and 17 years of age carry out an economic activity and 6.3% of girls. By age group, only 2.8% of children aged 5 to 11 years are in this situation, 10.5% of those aged 12 to 15 years and 17.8% of those aged 16 to 17 years.

166. Economic activities are mainly carried out by rural children (14.2% of rural children aged 5 to 17, 3.7% for urban children in the same age group). In particular, they perform activities in the agricultural and fisheries sectors (75%), which mainly involve boys from

rural areas, while girls predominate in domestic work. The vast majority of children (84.5%) are active in helping their families in family businesses or farms, especially in agriculture and livestock farming. However, children who performed household chores without family ties with the household representative constitute about 11% of the children in employment. Approximately 70% of activities carried out by children were considered to be dangerous and to be abolished.

167. Overall, the proportion of children in the population that has an activity to be abolished is 8.2% among boys and 4.4% among girls. The study did not, however, address the worst forms of child labour, such as the use of children for prostitution and illicit activities, notably, in the production and trafficking of narcotics, as defined under international conventions. The National List of Dangerous Child Labour, which applies to all children under the age of 16, except for the provisions under sub-paragraphs a), b) and c), which also applies to children under the age of 18, includes the following among the worst forms of child labour: a) all forms of slavery or practices similar to slavery, b) the use, procuring or offering of a child for prostitution, the production of pornography or pornographic performances, c) the use, procuring or offering of a child for illicit activity, in particular, for the production and trafficking of drugs as defined in relevant international treaties; d) work which, by its nature or circumstances in which it is carried out, may cause harm to the health, safety or morals of the Children.

168. The majority of children engaged in an economic activity go to school, but 1 in 5 children (22%) does not, with the highest proportion for girls (29% as opposed to 18% among boys). About 58% of children engaged in economic activity live in households with low or very low comfort levels, and the proportion is higher in female-headed households (7.5% vs. 5.4%), in particular in the case of the islands of Santiago (except Praia) and Fogo/Brava.

169. The institutional framework for combating child labour relies on education and education institutions (schools and delegations of the Ministry of Education) instructed to provide early warning of situations of early school drop-out and child abuse related to child labour.

170. It is also worth mentioning other relevant initiatives that are considered as milestones in the fight against the problem, such as the publication in 2007 of the document "Child and Work in Cabo Verde: A Legal and Sociological Study — Part I and II "; in 2012, the implementation of the "Continuous Multi-purpose Survey — Child Labour in Cabo Verde"; in 2014, the development of the Action Plan for the Prevention and Elimination of Child Labour, which outlines in an articulated manner the principles and methodology of intervention in the thematic area; the production of awareness-raising and dissemination material such as the "Education Guide — Identifying, Preventing and Combating Child Labour" and Cartoon "Manel e Pala" in "STOP Child Labour".

Use of narcotic drugs

171. Data from the 1st National Survey on the prevalence of psychoactive substance use (2013) show that the prevalence rate (15–64 years) of any illicit substance use (Cannabis, Ecstasy, Cocaine) is 7.6% (7.2% for Cannabis). The first uses occur essentially in youth: 11.5% started using before the age of 15; 59% when they were between 15 and 19 years old, 22% between 20 and 24 years old and 7.5% after 25 years of age. Despite the lower cocaine use, most users are youth: 66.7% between 15–24 years old.

172. With regard to drug prevention in the younger age groups, the Coordinating Commission Against Drugs (CCCD) has developed a number of interventions in a variety of contexts. In particular, prevention activities in institutions that work with children and youth in situations of vulnerability, having carried out activities in all structures of ICCA, as well as in cooperation with ACRIDES and the Happy Childhood Foundation (FIF). In school settings, together with the Ministry of Education and other partners, the CCCD has intensified interventions in educational facilities. With systematic training on the prevention of psychoactive substance use targeted to Primary and Secondary Education teachers, so that they can plan and carry out preventive activities in the school. It also promoted the "Peer Educators Training" in the country's Secondary Schools, starting in October 2013

and ending in May 2016. Since 2015, CCCD has been implementing the "Me and the Others" project in the country's Secondary Schools, which consists of training personal and social skills based on interactive stories where young people are called upon to make decisions with implications for the development of the narrative.

173. The Municipal Prevention Units established since 2001 to strengthen the decentralization of prevention activities have carried out informative, educational and awareness-raising activities among the community-based population, especially among the most vulnerable groups, including children and youth. The CCCD has provided technical, material and financial support for drug prevention initiatives submitted by youth associations and NGOs, with a focus on youth population — children, adolescents and young people, including youth in situation of school drop-out, allowing the conducting of various prevention activities, in leisure, recreation, sports, school, among other settings, based on diverse methodologies, including the testimony of recovering drug dependent persons. In order to reach the younger age group and encourage those who already use drugs to seek treatment, the CCCD promoted the training of "Volunteers multiplier youth on drug prevention", beginning in 2012 and ending in November 2016. Various informative materials are produced and distributed to the juvenile population.

174. In 2001, the SOS Drug line was implemented, as an instrument that aims to listen, support and advise participants on drug use prevention, anonymously and free of charge, which allowed to assist several children and youth, according to the identified needs.

175. The educational programs through radio and television have made it possible to transmit useful values, information and actions for drug use prevention, in particular to children, youth and family members, among which stands out the "Spaçu Pa uma Vida Saudável" radio program broadcast since 2005, the "Educating for a Life without Drugs" television programs, broadcast in 2010, and "Growing in Dialogue" broadcast in 2016.

176. With regard to prevention in prisons, it aims to promote an anti-drug culture, based on a peer education approach: awareness-raising and information activities are held, targeted at young inmates through the peer-group training and training on healthy lifestyles to young inmates and prison guards.

Sexual exploitation, sexual violence and trafficking

177. In Cabo Verde, sexual violence against children and adolescents is a concern for society in general and has been placed as a priority for the State. The Constitution of the Republic of Cabo Verde (Article 74), as well as the Child and Adolescent Statute — Article 9, assign to the Family, the Society and the State the duty to guarantee full protection, with absolute priority, to all children and adolescents.

178. In order to effectively combat the phenomenon of sexual abuse, in 2007 it was created the Interinstitutional Network, for Prevention, Protection and Fight against Sexual Abuse and Exploitation of Children and Adolescents. The network is coordinated by ICCA and involves other institutions such as the Judicial Police, National Police, Attorney General's Office, Directorate General for Tourism, Health Delegation of Praia and Civil Society Organizations.

179. In order to better understand and combat sexual violence against children and adolescents, the ICCA prepared the Studies on Sexual Abuse and Exploitation of Children and Adolescents, the first of which in 2005, the second in 2010 and the third in 2016, always associated with formulation of intervention measures.

180. The third study to combat sexual abuse and violence highlights the complexity related to sexual violence against children and adolescents in Cabo Verde, as it is associated with structural factors, such as vulnerabilities in the socio-cultural and macroeconomic field, and also interlinked with institutional scenarios, as in the case of insufficiency in the implementation of public policies. In 2016, the National Plan to Combat Sexual Violence Against Children and Adolescents was prepared for the period 2017–2019 (published in Official Gazette No. 72 I series of December 28, 2016), which is structured in 5 dimensions: (1) participation of children and adolescents: emphasizes the active role of children and adolescents in defending their rights, in promoting self-care and in the process of evaluating

the protection policies targeted to them; (2) prevention: covers educational and awareness-raising activities aimed at disseminating information and promoting the building of values and responsibilities around the rights of children and adolescents; (3) **care**: involves specialized care and network care for children and adolescents in situations of sexual violence and for their families, with speed and quality; (4) accountability: comprises the updating of the legal framework, the improvement of surveillance, the upgrading of reporting systems and accountability flows, with a view to maximizing the reduction of impunity; (5) mobilization: emphasizes the building of local and multilateral alliances for an integrated, comprehensive and sustainable Plan implementation. Its implementation will be supported by a number of stakeholders, of which 16 organs and institutions have been defined as responsible for actions and/or activities under the Plan, with absolute priority for public services, the private sector, representative organizations and social segments, including mobilization of children, adolescents and their families.

181. Also in 2016, the CNDHC, in collaboration with ICCA, presented the "Diagnostic Study on the profile of offenders sentenced of sexual crimes against minors: Knowing to better intervene." Statistical data from the Judicial Police indicates that between the years 2014 and the first half of 2016, 534 reports of sexual crimes against minors, including crimes of assault (258), rape (21) and sexual abuse of children (172), sexual abuse of children between the ages of 14 and 16 (62), sexual exhibitionism (12), pimping (4), exploitation of minors for pornographic purposes (1) and sexual harassment (3). According to data from the Judicial Police, the same number of complaints were recorded in 2014 and 2015 (218 complaints) and in the first half of 2016, 98 cases were reported.

182. Data from the Cabo Verdean Institute for Children and Adolescents report that in 2014 and 2015 there were 261 cases of sexual abuse against minors attended in the Children's Emergency Program, of which 45 complaints were filed through the Toll-Free Hotline. The data also reveal that from the year 2006 to 2015, 752 cases of sexual abuse against minors were attended in the Child Emergency Program.

183. According to the Data from the Directorate General of Prison Management and Social Reintegration, in August 2016, there were in the country's prisons a total of 1,232 citizens sentenced to effective prison sentences, 87 of whom were serving sentences for sexual crimes against minors.

184. According to data provided by the Prosecution Services, 413 complaints were filed in the judicial year of 2013/2014, 424 in the judicial year 2014/2015 and 411 in the judicial year 2015/2016, totalling 1,178 complaints of sexual criminal against minors. It can, therefore, be noted that in the last three years there has been no significant change or slowdown in the complaints.

185. With regard to the profile of victims of sexual abuse in Cabo Verde, the ICCA's global data, as well as the Profile of those convicted of sexual crimes against minors, show that girls are the main victims in 95% of cases of sexual abuse recorded between 2004 and 2015 and between the ages of 3 and 15 years, with the highest prevalence of cases occurring between the ages of 10 and 14 years.

186. With regard to the relationship between children and perpetrators of sexual abuse crimes, the data from the study on the Profile of sentenced offenders of sexual crime against minors, in proportion, show that the majority of abuses (34%) occurred in the domestic environment, committed at home (father, stepfather, uncle, cousin, brother, grandfather and in addition the bond includes brother-in-law, aunt's husband, father of the under-age sister, etc.), followed by 32% of the abuses committed by neighbours, the vast majority of them were entrusted with the care of minors and adolescents; 11 victims were female (10%); for 9 victims the author was unknown (8%); for 5 victims the author was a friend (5%); for 4 victims there was an alleged dating relationship (4%); for 8 other victims (7%) the bond includes brother-in-law, aunt's husband, father of a friend, etc.

187. In the area of prevention, in a joint action between ICCA and ICIEG, a television and radio campaign was produced to combat sexual abuse "*Say no to sexual abuse and violence against children and adolescents*", the republication of the Guide to combat sexual abuse and violence against children and adolescents launched in July 2015. In 2016, the

booklet "The Shared Secret" was published, which addresses the importance of reporting for cases of sexual abuse and violence.

Other forms of exploitation

188. Until the year 2016, no records of child slavery or other forms of exploitation were found, except those mentioned in this report.

Sale, trafficking and abduction of children

189. The Penal Code of Cabo Verde (Legislative Decree 4/2003, of November 18) establishes in its article 138, paragraph 3, sub-paragraph d) the aggravation of the sentence from 6 months to 3 years in one third in its minimum limits and for any person who illegitimately arrest, detain, hold imprisoned or detained a person or in any way to deprive them of their liberty under the age of 14 or a person who is particularly vulnerable according to age (Kidnapping). Moreover, Article 271 punishes with penalty of 6 to 12 years, whoever reduce another person to the state or condition of slave, to alienate, to give or to acquire another person or to seize it with the intention to keep it in situation of slave (Slavery).

190. In 2015, with amendments to the Penal Code through Legislative Decree 4/2015 of November 11, it was introduced the Article 271-A, which criminalizes trafficking in persons and punishing it with a sentence of 4 to 10 years to whomever offer, delivering, soliciting, accepting, transporting, lodging or hosting persons for the purpose of sexual exploitation, exploitation of the work or extraction of organs through violence, abduction or serious threat, through fraud or fraudulent manoeuvre, with abuse of authority resulting from a relationship of hierarchical, economic, work or family dependency, taking advantage of the psychic incapacity or situation of special vulnerability of the victim, or by obtaining the consent of a person who has control over the victim.

191. Under the Merida Convention (Articles 15, 16, 17 and 19) and the Palermo Convention (Articles 8 and 10) and Protocols thereto (Additional Protocol to Prevent, Repress and Punish Trafficking in Persons, especially Women and Children and the Additional Protocol against the Smuggling of Migrants), trafficking in persons was criminalized in the last revision of the Criminal Code of Cabo Verde in 2015.

192. Until the year 2016, there were no records of cases of trafficking or kidnapping of minors. However, there is a recommendation in the 2017–2019 National Plan to Combat Sexual Violence against Children and Adolescents to establish a list of missing children and adolescents in Cabo Verde in the databases of the National Police or Judicial Police, which will allow to inquire about the possible relationship of disappearances of children and adolescents with international human trafficking networks, among other purposes, for sexual exploitation on another island or abroad.

Children belonging to a minority or indigenous groups

193. Cabo Verde welcomes immigrants coming mainly from the West African Coast. There are no records of minorities or indigenous groups among immigrants or Cabo Verdeans.

Boys in street situation

194. In line with the recommendations made by the Committee to the country, in relation to the presence of children living and/or working on the streets, mainly in the urban centres of Mindelo, Praia and Sal, ICCA Centres were created in 2010 to serve children and adolescents in a street situation, established in the cities of Praia, Santa Maria/Sal and Santa Catarina de Santiago. In addition, it is worth mentioning he work developed by the NGO SOS Village, on the island of São Vicente and Santiago. On the island of Sal, it is also worth mentioning the intervention of the NGO Chã de Matias in Espargos with the "Integrar para não entregar" project and the NGO Castelos do Sal in Santa Maria, which also works to prevent risky behaviour among children in situations of vulnerability, aiming at the development of their personal and social skills. Activities developed include support for at-risk children through ATL and other activities that include follow-up in studies,

socio-family intervention program, socio-cultural programs, and hot meal. Supported children are attending school and have significantly improved their school performance. It also develops with the tour operators the "Do not give on the street, do not feed a problem" project in order to sensitize tourist visitors about the problems associated with the offer of money to children on the street.

195. The vulnerability analysis children in street situation in relation to the STI/HIV/AIDS carried out by ICM in 2005 allowed the identification of 663 children in the 6 surveyed municipalities (Praia, S. Vicente, Sal, Santa Catarina, Tarrafal and Santa Cruz) of which 28% can be considered as street children (184 children) and 72% as children on the street (479 children). The latter, despite being on the street, have not yet broken ties with the family, unlike the street children. The two main urban centres (Praia and Mindelo) and the island with the greatest tourist attraction (Sal) concentrate 80% of the children (about 530) that can be considered as street children. The street situation is a context of high vulnerability. Children's contact with tourism is a source of danger and exploitation of children. In addition to the use of narcotic drugs.

196. The study found that more than 70% of children working in the street bring money to the family, that is, most of the time the street situation stems from the imperative need to place the under-age children into the labour market to guarantee the family survival, instead of the usual and necessary activities at this stage (school, recreation, leisure). It should be noted that about 50% of children in the street live only with their mother in a situation of great socio-economic difficulty. Despite the great exposure to street socialization, marked by aggression, 33.5% of the children refer to the family as the main environment of ill-treatment they suffer.

197. More recently, a survey conducted by the NGO SOS Village in 2015 identified 33 children and adolescents on the streets of Mindelo, in São Vicente. A monitoring survey was conducted in 2016, counting 44 children and adolescents in street and street situations, in the city of Mindelo, supporting the dynamic nature of this problem. The SOS Social Centre of São Vicente admitted in its child protection program 12 children in their transit house/shelter.

198. Of the 44 children identified by this NGO, all males, 50% are 14–17 years old, 5% are over 17 years old, 7% are 6–9 years old and 39% 10–13 years old. Of the total, 18% are enrolled in school and 52% dropped out recently (previous years). A proportion of 63.6% had already been in a social institution, in a short- and medium-term institutionalization system. Among the factors driving their entry into the street situation are poverty of parents, alcoholism of parents, violence in the family, influence of friends, among others. The majority (57%) of children and adolescents reported having contact (with more or less frequency) with their parents or caretakers, whereas only 11.4% dissociated completely from the family members, being therefore considered a street child.

199. The joint interventions of ICCA and NGOs dedicated to the work and prevention of street children and in-the-street children (Day Care Centres, Nos Kaza Centre, Kindergartens of Municipal Councils, Religious Confessions and Civil Society Organizations, Community intervention Centers, etc.) are measures which have been adopted and which have a positive impact on the phenomenon of children in street situation, and which have contributed to a none exponential increase in the context of the largest urban centres in the country, and of tourist islands.